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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	Pieter Adriaan Oosterling, et al. Filing Date: September 24, 2001		
Serial No. 09/868,122			
Title of Application:	Device and Method for Milking Animals		
Confirmation No. 5702	Art Unit: 3643		
Examiner	Son T. Nguyen		

MAIL STOP FEE AMENDMENT Commissioner for Patents Post Office Box 1450 Alexandria. VA 22313-1450 Ms. Cofer 703 305-7658 Fax 703 305-0246

Response Transmittal and Petition For Time Extension (37 CFR 1.136[A])

Dear Sir:

- 1. This is a petition for an extension of the time for a total period of three months to respond to the Office Letter mailed on August 12, 2003.
- 2. A response in connection with the matter for which this extension is requested is filed herewith.
- 3. Applicant is a small entity. A verified statement has been filed.
- 4. Calculation of extension fee (37 CFR 1.17). \$475.00 Extension Fee is due with this request.

<u>Certificate of Mailing</u>: I hereby certify that this correspondence is today being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner for Patents; Post Office Box 1450; Alexandria, VA 22313-1450 and being faxed to Ms. Cofer at 703-305-7658.

February <u>20</u>, 2004

Charlotte E. Hanulik

)2/2672004 CCHAUI 00000117 194516 09868122)1 FC:2253 475:00-DA

Adjustment date: 06/07/2004 EEKUBAY1 02/26/2004 CCHAU1 00000117 194516 09868122 01 FC:2253 475.00 CR



DEP & REF

PATENT 03330-P0010A RJB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	Pieter Adriaan Oosterling, et al.		
Serial No. 09/868,122	Filing Date: September 24, 2001		
Title of Application:	Device and Method for Milking Animals		
Confirmation No. 5702	Art Unit: 3643		
Examiner	Son T. Nguyen		

Commissioner for Patents Post Office Box 1450 Alexandria, VA 22313-1450

Request for Refund (37 C.F.R. 1.28))

Dear Sir:

On February 20, 2004 a Petition for Time Extension was filed for this matter with an authorization to debit Account No. 19-4516 with the Petition (copies enclosed).

The \$475.00 fee was debited to Account No. 19-4516 twice, once on February 23, 2004 and once on February 26, 2004 (copy of 2/27/04 Monthly Statement of Deposit Account enclosed).

This is a request for a refund of \$475.00. Please credit Account No. 19-4516 for this refund. Also enclosed is the Customer Refunds by Electronic Funds Transfer form.

Respectfully submitted,

April <u>28</u>, 2004

Richard U. Basile, Registration No., 40,501

Attorney for Applicants

ST.ONGE STEWARD JOHNSTON & REENS LLC 986 Bedford Street; Stamford, CT 06905-5619

203 324-6155

Mailing Certificate: I hereby certify that this correspondence is today being deposited with the U.S. Postal Service as *First Class Mail* in an envelope addressed to: Commissioner for Patents and Trademarks; Post Office Box 1450; Alexandria, VA 22313-1450.

April 28, 2004

Charlotte F. Hanulik



Case No. 03330-P0010A RJB/ceh

Applicants: Pieter Adriaan Oosterling, et al.

SN: 09/868,122

Filed Sept. 24, 2001

Art Unit 3643

For: Device and Method for Milking Animals

Receipt is hereby acknowledged of Response Transmittal and Petition for Time Extension (8/12/03 Office Action) and request to charge account. #19-4516 the fee of \$475.00

Mailed February 20, 2004

Commissioner for Patents

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END=FEB-20 11:28

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FAX COVER SHEET

DATE February 19, 2004

DELIVER TO Ms. Cofer USPTO

FAX NUMBER 703 305-7658

PAGES 3

SSJR File 3330-P0010A

FROM Richard J. Basile



PATENT 03330-P0010A RJB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	Pieter Adriaan Oosterling, et al.	
Serial No. 09/868,122	Filing Date: September 24, 2001	
Title of Application:	Device and Method for Milking Animals	
Confirmation No. 5702	Art Unit: 3643	
Examiner	Son T. Nguyen	

MAIL STOP FEE AMENDMENT Commissioner for Patents Post Office Box 1450 Alexandria, VA 22313-1450

Ms. Cofer 703 305-7658 Fax 703 305-0246

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February <u>20</u>, 2004

Charlotte E. Hanulik



5. Fee Payment. This is a petition and a request to charge Account No. 19-4516 for the extension fee of \$475.00 and any fee as may be required or credit for any excess fee paid.

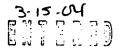
203 324-6155

Respectfully submitted,

February <u>70</u>, 2004

Richard J. Basile, Registration No. 40,501
Attorney for Applicants
ST.ONGE STEWARD JOHNSTON & REENS LLC
986 Bedford Street; Stamford, CT 06905-5619





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ST. ONGE STEWARD JOHNSTON & REENS ELIZABETH POTTER 986 BEDFORD STREET

STAMFORD CT 06905



FINA

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Washington, DC 20231
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Account No. 194516		
Date	2-27-04	
Page	1	

PLEASE SEND REMITTANCES TO: U. S. Patent and Trademark Office P.O. Box 70541 Chicago, IL 60673

DAT	E PO	STED	CONTROL	DESCRIPTION	DOCKET NO		FEE	CHARGES/	BALANCE
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2	12	04	95	29173796	,	16-D0001A	2453	15.00	5184.24
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Under provisions of the Debt Collection Improvement Act, effective January 2, 1999 refunds will be made by EFT (Electronic Funds Iransfer). The legislation requires that the U. S. Patent and Trademark Office convert from paper-based payment methods, i.e., checks from the U. S. Treasury, to EFT. EFT refunds will only be available to those customers who maintain an account with a U.S. banking institution.

It is of great importance that your current banking information be provided in order to process your refund request. Accordingly, please fill out the attached Automated Clearing House form so that you may receive your refund, if granted, by EFT. The ACH form includes banking information necessary to process your EFT refund. This information appears on the magnetic strip encoded at the bottom of your check; accordingly, you may fax a copy of your current check (marked "Void") in lieu of filling out the ACH form, The ACH form/check copy must be faxed within 3 business days of this notification. Completed forms may be faxed to the Refund Unit at 703-308-6778.

an individual, you may request an automatic waiver of the EFT requirement, by certifying to the Patent & Trademark Office, that payment by EFT would impose a hardship due to a physical or mental disability, or a geographic, language or literacy barrier, or would impose financial hardship. Waivers may also be faxed to the above fax number.

Please include the senal number and the amount to be refunded.

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payment data, by electronic means to vendor's financial institution. Fail receipt of payments through the Automated Cleaning House Payment S	ure to provide the requested information may delay or prevent the
PAYEE/COMPANY	INFORMATION
NAME ST DUGE STEWARD JOHNSTON REELS	SSN NO. OR TAXPAYER ID NO. Social Security No. or Employer Id No. 06-0967185
ADDRESS: 986 BESTOLD STREET	
STAMFORD, CT 06905	
	TELEPHONE NUMBER: (203) 324-6155
FINANCIAL INSTITUTION	ON INFORMATION
Name of Bank: FLEET BANK	
NINE-DIGIT ROUTING TRANSIT NUMBER:	
-011900571	
DEPOSITOR ACCOUNT NUMBER: 60151059	LOCKBOX NUMBER:
TYPE OF ACCOUNT: CHECKING SAVINGS	LOCKBOX